## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  46919  7590  05/08/2006  KONRAD RAYNES & VICTOR, LLP. ATTN: IBM36  315 SOUTH BEVERLY DRIVE, SUITE 210 BEVERLY HILLS, CA 90212  9/2006 SHASSEN2 00000248 090457  10734384					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must be used to some certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the Units States Postal Service with sufficient postage for first class mail in an enveloge addressed to the Mail Stop ISSUE FEE address above, or being facsimit transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)													
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APPLICATION NO.	FIRST NAMED INVE			TOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.											
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APPLN. TYPE	SMALL ENTITY	ISSUE FE \$1400	E	PUBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE										
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EXAMINER		ART UNIT		CL	ASS-SUBCLASS	_												
DUNCAN, MARC M  Change of correspondence address or indication of "F					714-027000													
CFR 1-63).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.															
PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Internat	RESIDENCE DATA TO Be an assignee is identified by 37 CFR 3.11. Completion EE	elow, no assignee of this form is NOT	lata will apper a substitute for (B) RESIDEN	or on the filing (CE: (C	the patent. If an assignment. CITY and STATE OR	country)	Arm	nonk, NY										
1a. The following fec(s) are	enclosed:	4b.	Payment of F	٠,	nount of the fee(s) is e	nclosed.												
Publication Fcc (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.															
Advance Order - # o	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 9-0457 (enclose an extra copy of this form).																	
a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.	☐ b. Applica	nt is no	longer claiming SM	ALL ENTITY :												
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Iss ublication Fee (if required) ords of the United States Par	ue yee and Publicat will not be accepted ept and Trademark	ion rec (if any from anyone Office.	other th	re-apply any previous	siy paid issue fi gistered attorno	er to the applic	the assignee or other part										
Authorized Signature	1/10						3 - ZOX	06										
Typed or printed name _	David W. Vi	ctor			Registration	No. 39	,867											
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